

Cost Growth Benchmark Technical Team Meeting Minutes

March 17, 2020

Zoom Conference Call

Technical Team

(in attendance)

Victoria Veltri

Zack Cooper

Pat Baker

Paul Grady

Angela Harris

Luis Perez

Judy Dowd

Rae-Ellen Roy

Paul Lombardo

Other State Participants

Olga Armah

Alla Veyberman

Adrian Texidor

Jason Prignoli - intern

Director Veltri called the meeting to order at 4:00pm. Introductions were made.

Director Veltri presented the mission of the Office of Health Strategy; Executive order #5; also noted that the Governor's bill, HB 5018 had a public hearing several people testified at the hearing.

Director Veltri asked if anyone had any questions on the bill. There were no questions on the bill.

The proposed charter sent to the group are on a draft format. Comments and suggestions are welcome on how we can modify it to capture what the group should accomplish. Charter is developed to:

- Lay out the function of the technical team;
- Clarify the priority of the team;
- Help OHS achieve the objectives and recommend to the Office of Health Strategy the annual health care cost growth benchmarks across all of the payers and population for 5 calendar years beginning on January 1, 2021; and
- Recommend the primary care target so we can get the 10% by 2025.

It was mentioned that the Quality Council will be used for the quality benchmarks which will go into effect in 2022. OHS is working on expanding the goals of the Quality Council.

The work of the Quality Council and the Cost Growth teams will come together and they will both inform and advise each other along with the Cost Growth Benchmark Advisory Board.

By late November or early December, OHS will notify the members who are governed by the benchmark--which includes the payers and providers of what the benchmark is for the following 5 years.

It was noted that if the HB 5018, the Governor's bill, passes, we are required to have a hearing before November about what the recommended benchmark is. Benchmarks that will be set might be revised depending on the what is happening in the health care environment over time.

This group should meet monthly and will have the ability to convene special groups (technical) as needed. The expertise may help inform how we develop the target.

Zack Cooper suggested we model the efforts as Massachusetts. The group should summarize in detail what the Massachusetts team has done so we do not start from the beginning. Mostly to learn what they have done.

Paul Grady recommended that we need to a look at Massachusetts', Rhode Island's and Delaware's procedures and the language that they are using to define the benchmark.

Vicki commented that OHS is completing a procurement for expertise around cost growth benchmarking and actuarial, economic and analytics expertise that the office would be using. Notice will be sent to the team once it has been decided who the contracted vendor is.

Vicki noted that the cost growth benchmark precedes the quality benchmarks. was Angela recommended that we maintain emphasis on both when we issue the cost benchmark so one is not more important that the other.

The by-laws are in a draft format, if there are any comments or technical edits please submit to Vicki or Mayda.

Olga Armah along with Alla Veyberman presented to the team a high level overview of the Data Compendium.

Vicki mentioned that within the compendium there are many tools that we have available that we can use and not have to pay separately because we have them on our other work.

Next Steps

- Finish contracting phase;
- The vendor once chosen will start the gap analysis.
- Individual meetings will be set up with the team and the vendor.
- Prior to the next meeting the discussion with the vendor, a plan of actions, adjustments to the bylaws and charter if necessary are to be done.
- Please send the comments individually on bylaws via email to Mayda.

Adjournment at 5:03 pm. Motion to adjourn made by Victoria Veltri. Approved by Pat Baker seconded by Paul Lombardo.

DRAFT